



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: David Jonathan Madge et al.

Application No. 10/658,971

Filed: September 9, 2003

Confirmation No. 3998

For: BORONIC ACID SALTS USEFUL IN
PARENTERAL FORMULATIONS

Examiner: To be assigned

Art Unit: 1615

Attorney Reference No. 6613-66749

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Attorney
for Applicant(s)

Wayne W. Rupert

Date Mailed March 16, 2004

COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

TRANSMITTAL LETTER

Enclosed for filing in the application referenced above are the following:

- ☒ Supplemental Information Disclosure Statement
- ☒ Form PTO-1449 and copy of reference listed thereon
- ☒ The Director is hereby authorized to charge any additional fees that may be required, or credit over-payment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

By

Wayne W. Rupert

Wayne W. Rupert
Registration No. 34,420

One World Trade Center, Suite 1600
121 S.W. Salmon Street
Portland, Oregon 97204
Telephone: (503) 226-7391
Facsimile: (503) 228-9446

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of: David Jonathan Madge et al.

Application No. 10/658,971

Filed: September 9, 2003

Confirmation No. 3998

For: BORONIC ACID SALTS USEFUL IN
PARENTERAL FORMULATIONS

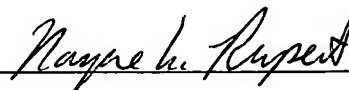
Examiner: To be assigned

Art Unit: 1615

Attorney Reference No. 6613-66749

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Attorney
for Applicant(s)Date Mailed March 16, 2004

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
PURSUANT TO 37 C.F.R. § 1.97(b)(3)**

COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

Listed on the accompanying form PTO-1449 and enclosed herewith is an English-language document. Applicants respectfully request that this document be listed as a reference cited on the issued patent.

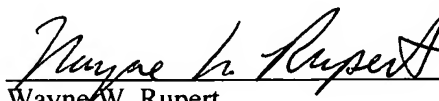
Applicants filed this Information Disclosure Statement ("IDS") before the mailing date of a first Office action on the merits. As a result, no fee should be required to file this IDS. However, if the Patent Office determines that a fee is required for Applicants to file this IDS, please charge any such fees, or credit overpayment, to Deposit Account No. 02-4550. A **duplicate** copy of this Information Disclosure Statement is enclosed.

The filing of this IDS shall not be construed to be an admission that the information cited in the statement is, or is considered to be, prior art or otherwise material to patentability as defined in 37 C.F.R. §1.56.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

By


Wayne W. Rupert
Registration No. 34,420

One World Trade Center, Suite 1600
121 S.W. Salmon Street
Portland, Oregon 97204
Telephone: (503) 226-7391
Facsimile: (503) 228-9446



INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Attorney Docket Number	6613-66749
Application Number	10/658,971
Filing Date	September 9, 2003
First Named Inventor	David Jonathan Madge
Art Unit	1615
Examiner Name	To be assigned

U.S. PATENT DOCUMENTS

Examiner's Initials*	Cite No. (optional)	Number	Publication Date	Name of Applicant or Patentee

FOREIGN PATENT DOCUMENTS

Examiner's Initials*	Cite No. (optional)	Country	Number	Publication Date	Name of Applicant or Patentee
		WIPO/PCT	WO 96/12499	02 May 1996	The DuPont Merck Pharmaceutical Company

OTHER DOCUMENTS

Examiner's Initials*	Cite No. (optional)	

**EXAMINER
SIGNATURE:**

**DATE
CONSIDERED:**

* Examiner: Initial if reference considered, whether or not in conformance with MPEP 609. Draw line through cite if not in conformance and not considered. Include copy of this form with next communication to applicant.